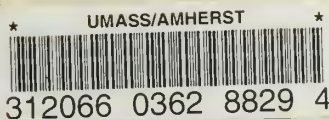


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AIDS NEWSLETTER

a monthly publication from the

Massachusetts Department of Public Health/Boston Department of Health and Hospitals
January, 1986

No.1

UPDATE

In Metropolitan Boston, the cumulative incidence of AIDS now approximates 100 cases per million residents. This rate is one-fifth that of New York City and San Francisco, and one-half the rate of Newark, New Jersey. Massachusetts has consistently ranked eighth nationally in total AIDS cases reported.

AIDS CASES ACCORDING TO REPORTING INSTITUTION AND YEAR OF DIAGNOSIS

Institution	Cumulative Case Reports			
	as of January '85		as of January '86	
	No.	(%)	No.	(%)
Baystate Medical Center	6	(3)	10	(2)
Beth Israel Hospital	16	(8)	34	(8)
Boston City Hospital	11	(5)	28	(7)
Brigham & Women's Hospital	11	(5)	21	(5)
Cambridge Hospital	2	(1)	6	(1)
Carney Hospital	3	(1)	7	(2)
Harvard Community Health Plan	3	(1)	5	(1)
Lahey Clinic	6	(3)	11	(3)
Massachusetts General Hospital	41	(20)	80	(19)
Mt. Auburn Hospital	1	(1)	8	(2)
New England Deaconess Hospital	56	(28)	112	(27)
New England Medical Center	6	(3)	19	(5)
University Hospital	8	(4)	12	(3)
V.A. Medical Center	5	(3)	6	(1)
Other Boston Hospitals	3	(1)	10	(2)
Other Non-Boston Hospitals	26	(13)	49	(12)
Total	204	(100)	418	(100)

REPORTED AIDS CASES ACCORDING TO COUNTY OF RESIDENCE

Suffolk	173	Worcester	8
Middlesex	72	Plymouth	6
Barnstable	19	Nantucket	2
Hampden	16	Franklin	2
Essex	13	Hampshire	1
Norfolk	14	Berkshire	1
Bristol	8	Dukes	0

Note: Eighty-three of the 418 reported cases were not residents of Massachusetts when symptoms first appeared. These patients were subsequently diagnosed and cared for in the Commonwealth.





FEB 21 1986



AIDS NEWSLETTER

a monthly publication from the

Massachusetts Department of Public Health/Boston Department of Health and Hospitals
Vol. 2 **January, 1986** **No.1**

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Carney Hospital	3	(1)	7	(2)
Harvard Community Health Plan	3	(1)	5	(1)
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V.A. Medical Center	5	(3)	6	(1)
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Norfolk	14	Berkshire	1
Bristol	8	Dukes	0

Note: Eighty-three of the 418 reported cases were not residents of Massachusetts when symptoms first appeared. These patients were subsequently diagnosed and cared for in the Commonwealth.

FACTS ABOUT AIDS: STATE AND NATIONAL COMPARISONS

Total Cases as of 1/1/86	Massachusetts (418)		United States (15,948)	
	No.	(%)	No.	(%)
Residence				
City of Boston	167	(40)		
*Remainder SMSA	112	(27)		
Remainder State	56	(13)		
Out-of-State	83	(20)		
Primary Risk Factors (Adult)	409		15,719	
Homosexual	302	(74)	11,513	(73)
I.V. Drug	40	(10)	2,684	(17)
Hemophilia	3	(1)	123	(1)
Transfusion Associated (TA)	11	(3)	252	(2)
Heterosexual Contact	6	(1)	179	(1)
*Other/Unknown	47	(11)	968	(6)
Primary Risk Factors (Pediatric)	9		229	
Parent with AIDS/or at increased risk for AIDS	5	(56)	172	(75)
Hemophilia	2	(22)	11	(5)
Transfusion Associated	2	(22)	34	(15)
*Other/Unknown	0	(—)	12	(5)
Primary Diagnosis				
Pneumocystis carinii Pneumonia (PCP)	220	(53)	9,142	(57)
Kaposi's Sarcoma (KS)	100	(24)	2,965	(19)
PCP + KS	18	(4)	899	(6)
Other Opportunistic Infections	80	(19)	2,942	(18)
Sex				
Male	392	(94)	14,693	(92)
Female	26	(6)	1,255	(8)
Condition				
Alive	247	(59)	7,787	(49)
Dead	171	(41)	8,161	(51)
Race				
White	309	(74)	9,473	(59)
Black	75	(18)	4,004	(25)
Hispanic/Unknown	34	(8)	2,471	(16)

*Refers to the Standard Metropolitan Statistical Area within Route 495.

**Other/Unknown category includes cases without any of the known risk factors and persons born in countries in which most AIDS cases have not been associated with known risk factors.

AIDS ACTION COMMITTEE SERVICES

The AIDS ACTION COMMITTEE (AAC) assesses needs and delivers direct patient support services for all people in Massachusetts diagnosed with Acquired Immune Deficiency Syndrome (AIDS) and AIDS Related Complex (ARC). In conjunction with these services, AAC produces and distributes educational materials and presentations for high risk populations and health care providers, as well as civic, religious and business organizations. Founded in 1983 as a special committee of the Fenway Community Health Center to coordinate AIDS-related services and information throughout Massachusetts, AAC has established effective relationships with hospitals, direct care facilities, service agencies and community groups. In September 1985, Governor Dukakis designated the AIDS ACTION COMMITTEE as the Massachusetts "sole AIDS service provider".

To date, AAC has provided direct financial, psychosocial and personal support services to over 150 people diagnosed with AIDS in Massachusetts. Over 12,000 health care and social work professionals and community service groups have benefited by in-house AIDS seminars. More than 100,000 Massachusetts residents in high-risk populations have attended AAC AIDS information and risk reduction seminars. As the AIDS Action Committee enters its third year, its support services and well-designed educational programs will reach the growing number of professionals, patients and at-risk members concerned with AIDS. Some of AAC's services are summarized below.

Patient Support

The Support Services programs are designed and managed by two full-time coordinators and staffed by over 100 trained volunteers. Support Service Coordinators evaluate the needs of each referred AIDS or ARC patient and arrange for housing, transportation and financial assistance. In appropriate cases, a trained "hospice" volunteer is assigned.

Education

The AAC education programs are directed by a paid educational coordinator who manages a staff of four health educators who target specific at risk populations (e.g., gay men, I.V. drug users, recent Haitian immigrants). In addition, the AAC educational coordinator manages the production and distribution of educational programs and services through a staff of over 50 volunteers. AAC programs have included in-service health education seminars, health education/risk reduction workshops, and statewide conferences for the general public.

Mental Health

AAC mental health programs and services are planned, designed, and evaluated by a professionally qualified mental health coordinator who manages a staff of volunteer psychiatrists, psychologists, and social workers. The mental health team leads groups, provides individual therapy, and makes referrals for individuals affected by stress, anxiety, and mental disorders related to AIDS and ARC.

Alternative Therapies

The AAC Alternative Therapies Team is managed by one part-time paid professional who manages a volunteer staff of qualified acupuncturists, massage therapists, chiropractors, stress management therapists, dieticians and other therapists. People with AIDS and ARC, as well as health care providers, mental health providers, and educators are first advised through seminars and printed materials about the benefits which can be expected from supplementary health maintenance therapies. The team then assesses needs and refers clients to qualified professionals for treatment in the provider's office or at the client's home.

Further information on all AAC service programs is available by calling the Committee's administrative offices at (617) 437-6200, or the Massachusetts toll free hotline 1-800-235-2331.

CALENDAR

- Monday, January 27** HTLV-III Antibody Testing: Fact and Fiction
An evening informational forum for individuals concerned about exposure to HTLV-III.
Sponsored by the Massachusetts Department of Public Health.
7:30 - 9:00 p.m. Boston Public Library, Conference Room 5
Free to public; no advance registration required.
For more information, contact Bob Carr at (617) 522-3700 X 107.
- Monday, February 10** AIDS Workshop for Probation and Parole Officers
10 a.m. - Noon, McCormack Building, Boston
For further details, contact Laurie Kunches at (617) 424-4377.
- Friday, February 21** AIDS and HTLV-III: Caring for Children
Free Workshop for Public Health, Early Intervention and Day Care Staff
Sponsored by the Division of Family Health, DPH
Two sessions: 10 a.m. - Noon or 2-4 p.m.
No fee; walk-in registration
Auditorium, Department of Transportation Building
10 Park Plaza, Boston
For more information, contact Dr. Serena Mailloux at (617) 727-3372.

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AIDS NEWSLETTER

a monthly publication from the
Massachusetts Department of Public Health/Boston Department of Health and Hospitals

Vol. 2

October, 1986

No. 10

UPDATE

Thirty-one new cases of Acquired Immune Deficiency Syndrome (AIDS) were reported to the surveillance program in September. The revised scheme for classifying the source of HIV transmission to adult AIDS patients now clusters persons infected by heterosexual contact. The heterosexual category includes the sexual partners of recognized risk group members and recent entrants from countries where heterosexual transmission is believed to play a major role.

REPORTED AIDS CASES ACCORDING TO INSTITUTION AND YEAR

Institution	Cumulative Case Reports			
	as of October '85		as of October '86	
	No.	(%)	No.	(%)
APR 7 1987				
Baystate Medical Center	10	(3)	18	(3)
University of Massachusetts	29	(8)	44	(7)
Depository Copy	25	(7)	42	(6)
Brigham & Women's Hospital	19	(5)	36	(6)
Cambridge Hospital	3	(1)	6	(1)
Carney Hospital	7	(2)	9	(1)
Children's Hospital	5	(1)	13	(2)
Harvard Community Health Plan	4	(1)	20	(3)
Lahey Clinic	8	(2)	19	(3)
Massachusetts General Hospital	70	(19)	103	(16)
Mt. Auburn Hospital	5	(1)	16	(2)
New England Deaconess Hospital	98	(27)	172	(26)
New England Medical Center	14	(4)	30	(5)
University Hospital	11	(3)	19	(3)
V.A. Medical Center	6	(2)	15	(2)
Worcester Memorial	2	(1)	7	(1)
Other Boston Hospitals	3	(1)	16	(2)
Other Non-Boston Hospitals	44	(12)	68	(10)
Total	364	(100)	653	(100)

REPORTED AIDS CASES ACCORDING TO COUNTY OF RESIDENCE

Suffolk	278	Plymouth	15
Middlesex	102	Bristol	12
Barnstable	29	Berkshire	4
Norfolk	27	Nantucket	2
Hampden	23	Franklin	2
Essex	23	Hampshire	2
Worcester	20	Dukes	0

Note: One hundred-fourteen (17%) of the 653 reported cases were not residents of Massachusetts when symptoms first appeared. These patients were subsequently diagnosed and cared for in the Commonwealth.

AIDS SURVEILLANCE SUMMARY: STATE AND NATIONAL COMPARISONS

Total Cases as of 10/1/86	Massachusetts (653)		United States (25,650)	
	No.	(%)	No.	(%)
Residence				
City of Boston	271	(42)		
*Remainder SMSA	139	(21)		
Remainder State	129	(20)		
Out-of-State	114	(17)		
Transmission Categories (Adult Cases)	637		25,296	
Homosexual/Bisexual Male	480	(75)	13,587	(73)
I.V. Drug User	68	(11)	4,322	(17)
Hemophilia	7	(1)	215	(1)
Heterosexual Cases**	50	(8)	959	(4)
Transfusion Blood/Components	15	(2)	436	(2)
None of the above	17	(3)	777	(3)
Transmission Categories (Children 13 yrs)	16		354	
Parent with AIDS/or at increased risk for AIDS	11	(69)	283	(80)
Hemophilia	1	(6)	15	(4)
Transfusion, Blood/Components	4	(25)	46	(13)
None of the above	0	(0)	10	(3)
Primary Diagnosis (ordered hierarchically)				
Pneumocystis carinii Pneumonia (PCP)	397	(61)	16,376	(64)
Other Opportunistic Diseases	121	(18)	5,615	(22)
Kaposi's Sarcoma (KS)	135	(21)	3,659	(14)
Sex				
Male	505	(93)	23,782	(93)
Female	48	(7)	1,868	(7)
Condition				
Alive	319	(49)	11,305	(44)
Dead	334	(51)	14,345	(56)
Race				
White	485	(74)	15,339	(60)
Black	117	(18)	6,398	(25)
Hispanic	47	(7)	3,632	(14)
Other/Unknown	4	(1)	281	(1)

*Refers to the Standard Metropolitan Statistical Area within Route 495.

**Includes persons who have had heterosexual contact with high risk individuals and persons born in countries in which heterosexual transmission is believed to play a major role.

EPIDEMIOLOGIC STUDIES OF HUMAN IMMUNODEFICIENCY VIRUS (HIV)

In August, a summary of current research protocols for treatment of HIV-infected patients was published. In response to that publication, several investigators received welcome referrals to their studies. We have compiled a similar listing of ongoing epidemiologic studies of HIV infection, with the assistance of the AIDS Action Committee. All studies are open for enrollment at this time, and appropriate subjects can be referred to the contact persons cited below.

<u>Center</u>	<u>Study</u>	<u>Open to:</u>
Boston City Hospital (Contact: Margy Hutchinson 424-4800)	<ul style="list-style-type: none"> o Study of HIV in high risk pregnant women. o Natural history of HIV infection among drug users. o HIV infection in cervical tissue. 	<ul style="list-style-type: none"> o HIV infected pregnant women. o Subjects must be in long term drug programs. o Seropositive women.
Fenway Community Health Center (Contact: Patrick Riggs, P. Clay Stephens 267-7573) and New England Deaconess Hospital (Contact: Helen Fitch, 739-9717)	Study of HIV transmission among sexual partners (in collaboration with the Centers for Disease Control and Boston Department of Health and Hospitals.)	People with AIDS or ARC (diagnosed after 2/85), healthy homosexual men and their sexual partners.
Fenway Community Health Center (Contact: Scott Saltzman, 267-7573)	Natural history study of HIV infection in homosexual men (in collaboration with the Commonwealth of Mass./ University of Massachusetts Amherst).	Asymptomatic gay men who are patients at FCHC (Participation of sexual partners not required).
Boston Department of Health and Hospitals (Contact: Stewart Landers 424-4743)	Health care cost utilization study (in collaboration with the Commonwealth of Mass.)	Patients with AIDS or ARC.
Children's Hospital (Contact: Dr. Ken McIntosh 735-7621)	Natural history of AIDS and HIV infection in children	Children with AIDS, ARC, or HIV infection. No older than 18 years.
New England Deaconess Hospital (Contact Marion Longo 732-8593, page 2477), and Massachusetts General Hospital (Contact: Ann Locke, 726-1740)	Psychosocial study to determine major concerns of people with AIDS and their sources of social support.	Patients with AIDS.

CALENDAR

- Saturday, November 8** "Arteetera '86" Benefit auction extravaganza for the AIDS Action Committee, Boston City Hall. Call Liz Page at 437-6200.
- Saturday, November 22** "Dynasty Ball", AAC benefit. For ticket information call 437-6200.
- Wednesday, December 10** "Going Beyond Fear". Conference for health care and service providers; all day program to be held in Lowell. Call Janet Bath, (DPH Health Resource Office 727-0368) or the AAC (437-6200) for information.

Positions Available: The Comprehensive Pediatric AIDS Program, opening soon at Boston City Hospital, is seeking a full-time program director, a part-time social worker and six full-time respite care workers. Call Linette Liebling (424-4377) for information.

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AIDS NEWSLETTER

a monthly publication from the
Massachusetts Department of Public Health/Boston Department of Health and Hospitals

Vol. 2 November, 1986

No. 11

UPDATE

Eighteen new cases of Acquired Immune Deficiency Syndrome (AIDS) were reported to the surveillance program in October. The most recent doubling time for the cumulative Massachusetts total is 14 months, (August '85 to October '86). The present rate of new case reports represents a welcome deceleration from the previous 10-month doubling time even though the totals continue to climb.

GOVERNMENT DOCUMENTS COLLECTION REPORTED AIDS CASES ACCORDING TO INSTITUTION AND YEAR

APR 7 1987	Institution	Cumulative Case Reports			
		as of November '85		as of November '86	
		No.	(%)	No.	(%)
University of Massachusetts Depository Copy	Baystate Medical Center	10	(3)	19	(3)
	Beth Israel Hospital	30	(8)	44	(7)
	Boston City Hospital	26	(7)	43	(6)
	Brigham & Women's Hospital	19	(5)	38	(6)
	Cambridge Hospital	5	(1)	6	(1)
	Carney Hospital	7	(2)	10	(2)
	Children's Hospital	5	(1)	13	(2)
	Harvard Community Health Plan	4	(1)	21	(3)
	Lahey Clinic	8	(2)	19	(3)
	Massachusetts General Hospital	72	(19)	105	(16)
	Mt. Auburn Hospital	8	(2)	16	(2)
	New England Deaconess Hospital	102	(27)	175	(26)
	New England Medical Center	17	(5)	32	(5)
	University Hospital	11	(3)	19	(3)
	V.A. Medical Center	6	(2)	18	(3)
	Worcester Memorial	2	(1)	7	(1)
	Other Boston Hospitals	3	(1)	16	(2)
	Other Non-Boston Hospitals	40	(11)	70	(10)
	Total	375	(100)	671	(100)

REPORTED AIDS CASES ACCORDING TO COUNTY OF RESIDENCE

Suffolk	286	Plymouth	16
Middlesex	104	Bristol	12
Barnstable	29	Berkshire	4
Norfolk	29	Nantucket	2
Essex	25	Franklin	2
Hampden	24	Hampshire	2
Worcester	20	Dukes	0

Note: One hundred-sixteen (17%) of the 671 reported cases were not residents of Massachusetts when symptoms first appeared. These patients were subsequently diagnosed and cared for in the Commonwealth.

AIDS SURVEILLANCE SUMMARY: STATE AND NATIONAL COMPARISONS

Total Cases as of 11/1/86	Massachusetts (671)		United States (27,254)	
	No.	(%)	No.	(%)
Residence				
City of Boston	279	(42)		
*Remainder SMSA	145	(22)		
Remainder State	131	(19)		
Out-of-State	116	(17)		
Transmission Categories (Adult Cases)	655		26,878	
Homosexual/Bisexual Male	452	(69)	17,646	(66)
I.V. Drug User	73	(11)	4,547	(17)
Homosexual Male and I.V. Drug User	37	(6)	2,128	(8)
Hemophilia	7	(1)	235	(1)
Heterosexual Cases**	51	(8)	1010	(4)
Transfusion Blood/Components	17	(2)	485	(2)
None of the above	18	(3)	827	(3)
Transmission Categories (Children < 13 yrs)	16		376	
Parent with AIDS/or at increased risk for AIDS	11	(69)	299	(80)
Hemophilia	1	(6)	19	(5)
Transfusion, Blood/Components	4	(25)	48	(13)
None of the above	0	(0)	10	(3)
Primary Diagnosis (ordered hierarchically)				
Pneumocystis carinii Pneumonia (PCP)	411	(61)	17,426	(64)
Other Opportunistic Diseases	124	(18)	5,989	(22)
Kaposi's Sarcoma (KS)	136	(20)	3,839	(14)
Sex				
Male	620	(92)	25,277	(93)
Female	51	(8)	1,977	(7)
Condition				
Alive	325	(48)	11,909	(44)
Dead	346	(52)	15,345	(56)
Race				
White	499	(74)	16,367	(60)
Black	121	(18)	6,757	(25)
Hispanic	47	(7)	3,837	(14)
Other/Unknown	4	(1)	293	(1)

*Refers to the Standard Metropolitan Statistical Area within Route 495.

**Includes persons who have had heterosexual contact with high risk individuals and persons born in countries in which heterosexual transmission is believed to play a major role.

Azidothymidine for AIDS Treatment

The Food and Drug Administration (FDA) has approved a "treatment" investigational new drug (IND) application for azidothymidine (AZT) in the treatment of certain AIDS patients. This designation permits broad use of the experimental drug under the specific procedures in the treatment (IND) protocol. At the request of the Burroughs Wellcome Company, manufacturer of AZT, the FDA has waived the requirement for Institutional Review Board approval of clinical research with AZT for eligible AIDS patients. Informed consent must be obtained from each subject who receives AZT, since federal law does not permit a waiver of this requirement.

AZT is a member of a broad spectrum of antiviral drugs called nucleoside analogs. It was first synthesized by Jerome P. Horwitz of the Detroit Institute of Cancer Research in 1984. When scientists at the National Cancer Institute demonstrated that the compound was active against the human immunodeficiency virus (HIV) in the laboratory, clinical research began with 19 AIDS patients. The results of Phase I studies indicated that AZT brought about increases over the short term in the number and function of T cells. At moderate doses (250 mg. every 4 hours for 2-6 months) AZT prevented HIV from multiplying.

On the basis of these encouraging results, a Phase II placebo - controlled study was launched in February 1986 at centers across the nation, including two Boston hospitals. To be eligible for the AZT protocol, patients had recovered from Pneumocystis carinii pneumonia (PCP). The preliminary results for the 282 patients enrolled in this trial demonstrated that AZT significantly prolonged survival. Approximately 25% of the patients who received AZT developed anemia and required blood transfusion. This depression of bone marrow function recurred in some patients, even after reducing their AZT dosage. Other reported side effects include headache, mild confusion or anxiety, skin rashes and itching, and leukopenia. Long-range side effects are presently unknown.

Physicians can now request AZT by contacting the AZT Information Line at (800)-843-9388 to obtain the application package. This ground work can be done in anticipation of future eligible patients, and does not require an immediate patient request. Only patients who have recovered from PCP are currently eligible to receive AZT. Patients are not eligible if they are under age 12, are currently or potentially pregnant, are asymptotically seropositive, or have AIDS-related complex.

Once the physician has been registered with the IND Coordinating Center, a hospital pharmacy designated to dispense the drug must also be registered. Clinical information regarding each patient requesting AZT must be reviewed for eligibility prior to enrollment by the Coordinating Center. The manufacturer has assured an adequate supply of AZT for all eligible patients, and will provide the drug free of charge to participants in the treatment protocol. The drug is shipped within 48 hours of determining a patient's eligibility.

During the first six weeks of operation, the AZT Coordinating Center has enrolled more than 1200 patients from across the country. The AZT Hotline received 21,000 telephone inquiries during this interval. With the development of a new 1-AA designation for all experimental drugs for AIDS treatment, the FDA has given highest priority to these clinical studies within its review process.

AZT Information 1-800-843-9388

CALENDAR

- Thursday, December 4** Christmas Auction to benefit the AIDS Action Committee, Club Cafe, Boston. Call 437-6200.
- Wednesday, December 10** "AIDS:" Getting Beyond the Fear." Conference for health care and services providers.
Registration at 8:15 a.m. Program 9 a.m. - 4 p.m.
400 Merrimack Street, Lowell.
Smith-Baker Health Center
Approval for continuing education credits, free of charge. To register, call the Health Resources Office at 727-0368.

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AIDS NEWSLETTER



a monthly publication from the

Massachusetts Department of Public Health/Boston Department of Health and Hospitals

Vol. 2

December, 1986

No. 12

UPDATE

In November, twenty-one new cases of AIDS were reported to the surveillance program. All of the new cases this month were Massachusetts residents. Unlike earlier years when 24-28% of all patients reported here were non-residents, only 12% of the 1986 cases resided in other jurisdictions when illness began.

REPORTED AIDS CASES ACCORDING TO INSTITUTION AND YEAR

GOVERNMENT DOCUMENTS COLLECTION	Institution	Cumulative Case Reports			
		as of 11/30/85 No.	(%)	as of 11/30/86 No.	(%)
APR 7 1987 University of Massachusetts Depository Copy	State Medical Center	10	(3)	20	(3)
	Beth Israel Hospital	32	(8)	47	(7)
	Boston City Hospital	26	(7)	45	(7)
	Massachusetts Women's Hospital	21	(5)	39	(6)
	Cambridge Hospital	5	(1)	7	(1)
	Carney Hospital	7	(2)	10	(1)
	Children's Hospital	5	(1)	13	(2)
	Harvard Community Health Plan	4	(1)	21	(3)
	Lahey Clinic	8	(2)	20	(3)
	Lemuel Shattuck Hospital	2	(1)	6	(1)
	Massachusetts General Hospital	78	(20)	105	(15)
	Mt. Auburn Hospital	8	(2)	17	(3)
	New England Deaconess Hospital	110	(28)	181	(26)
	New England Medical Center	17	(4)	32	(5)
	Newton-Wellesley Hospital	1	(0)	6	(1)
	University Hospital	12	(3)	21	(3)
	V.A. Medical Center	6	(2)	18	(3)
	Worcester Memorial	2	(1)	7	(1)
	Other Boston Hospitals	3	(1)	11	(2)
	Other Non-Boston Hospitals	40	(10)	66	(10)
	Total	397	(100)	692	(100)

REPORTED AIDS CASES ACCORDING TO COUNTY OF RESIDENCE

Suffolk	295	Plymouth	17
Middlesex	109	Bristol	12
Barnstable	30	Berkshire	4
Norfolk	29	Nantucket	3
Essex	25	Franklin	2
Hampden	25	Hampshire	2
Worcester	23	Dukes	0

Note: One hundred-sixteen (17%) of the 692 reported cases were not residents of Massachusetts when symptoms first appeared. These patients were subsequently diagnosed and cared for in the Commonwealth.

AIDS SURVEILLANCE SUMMARY: STATE AND NATIONAL COMPARISONS

Total Cases as of 11/30/86	Massachusetts (692)		United States (28,246)	
	No.	(%)	No.	(%)
Residence				
City of Boston	288	(41)		
*Remainder SMSA	150	(22)		
Remainder State	138	(20)		
Out-of-State	116	(17)		
Transmission Categories (Adult Cases)	675		27,843	
Homosexual/Bisexual Male	466	(69)	18,229	(65)
I.V. Drug User	76	(11)	4,760	(17)
Homosexual Male and I.V. Drug User	38	(6)	2,188	(8)
Hemophilia	7	(1)	242	(1)
Heterosexual Cases**	52	(8)	1060	(4)
Transfusion Blood/Components	17	(3)	508	(2)
None of the above	19	(3)	856	(3)
Transmission Categories (Children < 13 yrs)	17		403	
Parent with AIDS/or at increased risk for AIDS	12	(71)	319	(80)
Hemophilia	1	(6)	22	(5)
Transfusion, Blood/Components	4	(24)	52	(13)
None of the above	0	(0)	10	(2)
Primary Diagnosis (ordered hierarchically)				
Pneumocystis carinii Pneumonia (PCP)	431	(62)	18,063	(64)
Other Opportunistic Diseases	123	(18)	6,247	(22)
Kaposi's Sarcoma (KS)	138	(20)	3,936	(14)
Sex				
Male	641	(93)	26,183	(93)
Female	51	(7)	2,063	(7)
Condition				
Alive	332	(48)	12,393	(44)
Dead	360	(52)	15,853	(56)
Race				
White	515	(74)	16,851	(60)
Black	124	(18)	6,993	(25)
Hispanic	49	(7)	4,109	(14)
Other/Unknown	4	(1)	293	(1)

*Refers to the Standard Metropolitan Statistical Area within Route 495.

**Includes persons who have had heterosexual contact with high risk individuals and persons born in countries in which heterosexual transmission is believed to play a major role.

The Medical Cost of Treating AIDS Patients in Massachusetts

The Community Infectious Disease Epidemiology Program (CIDEP) of the Boston Department of Health and Hospitals has engaged in a medical utilization study funded by the AIDS Research Council of the Massachusetts Department of Public Health. The initial phase of this study, to evaluate the cost and utilization of health care by 45 AIDS patients diagnosed and treated at the New England Deaconess Hospital (NEDH) during 1985, is now complete.

Previous investigation has suggested that the direct cost of medical care for the nationally reported 28,246 patients with AIDS may be as high as \$147,000 per patient. To evaluate the cost of medical care in a Boston hospital, a utilization review was performed on 45 individuals, all of whom met the CDC criteria for AIDS and were alive as of September, 1984. At that time this group comprised all AIDS patients cared for at the NEDH and were 31% of all AIDS patients living in Massachusetts. Socio-demographic data and clinical characteristics were obtained by reviewing ambulatory and hospital records at NEDH. Information on use of inpatient hospital services were obtained from the billing department of the NEDH.

Almost all the patients (93%) were homosexual or bisexual men. Nearly 40% of the patients lacked private insurance coverage and were uninsured or covered only by Medicaid. The most common initial clinical presentations were Kaposi's Sarcoma (38%) or Pneumocystis carinii pneumonia (31%), and another 18% had both diseases. A minority of patients had only one opportunistic infection during the one year study period.

Of the 45 patients with AIDS, 42 (93%) were hospitalized at least once during the study period. In all, members of the cohort were hospitalized 70 times. The mean length per hospitalization was 21 days, including 1 day spent in the Intensive Care Unit, at a mean cost of \$14,189 per hospitalization. Due to the variable length of follow-up, an annualized estimate of utilization was calculated. The estimated mean number of hospitalizations per patient per year was 3.3 with a total of 61.9 hospital days and 4 ICU days. Projected mean annual inpatient costs were \$42,517 per patient per year. The mean outpatient cost of medical care was \$3,988 per patient per year, raising the total cost of treating AIDS patients at the NEDH to \$46,505 per patient per year. For a median survival of 13 months (which may improve in the future), the total medical care costs of each patient would average \$50,380.

The results of this study (1), taken together with the results of a similar study conducted in San Francisco (2), indicate that the cost of treating AIDS patients is less than previously estimated, but more than the cost of treating non-elderly adults diagnosed with life threatening diseases such as breast, colon-rectal or lung cancer.

An extension of this study to include an additional 5 hospitals that care for 75% of the AIDS cases in Massachusetts is currently underway. Evaluation of data from a variety of clinical settings, with different provider and patient characteristics, will allow us to refine these findings. In the meantime our results provide baseline and preliminary data for policy makers.

- (1) Seage GR, Landers S, Barry MA et al. JAMA 1986; 256:3107-3109.
- (2) Scitovsky AA, Cline M, Lee PR. JAMA 1986; 256:3103-3106.

CALENDAR

Monday, January 12

"AIDS: Getting Beyond the Fear", Public Health Rounds at Berkshire Community College, Pittsfield, 7 - 9 p.m.

Friday, January 23

"What Are We Telling People About HIV Infection These Days?" A round table discussion for providers, counsellors and educators. Pot-luck dinner at 6:30 p.m., Discussion begins at 7:00 p.m.
Fenway Community Health Center,
16 Haviland St., Boston. 267-7573.

Notice: The Office of the Community Health Resource Specialist has been relocated from the Northampton Regional Health Office to the campus of Western Massachusetts Hospital. Bob Abel's new address is:

Office of Health Resources
91 East Mountain Road
Westfield, MA 01085
Telephone: (413) 562-7583

Job Announcement

The Alternative Testing site program is currently hiring Regional AIDS Health Educators in the areas of Springfield, Lowell/Lawrence, and New Bedford/Fall River. Inquiries including resume, should be directed to:

Robert Carr
Program Coordinator, ATS
State Laboratory Institute
305 South Street
Jamaica Plain, MA 02130

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